

**PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN 12 MONTHS  
(6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION  
AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. § 119(a)-(d)**

COUNTRY (OR INDICATE IF PCT)	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 37 USC 119
			<input type="checkbox"/> YES    NO <input type="checkbox"/>
			<input type="checkbox"/> YES    NO <input type="checkbox"/>
			<input type="checkbox"/> YES    NO <input type="checkbox"/>
			<input type="checkbox"/> YES    NO <input type="checkbox"/>
			<input type="checkbox"/> YES    NO <input type="checkbox"/>

**CLAIM FOR BENEFIT OF PRIOR U.S. PROVISIONAL APPLICATION(S)**  
(34 U.S.C. § 119(e))

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

**PROVISIONAL APPLICATION NUMBER**

**FILING DATE**

\_\_\_\_\_ / none \_\_\_\_\_  
 \_\_\_\_\_ / \_\_\_\_\_  
 \_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**CLAIM FOR BENEFIT OF EARLIER US/PCT APPLICATION(S)  
UNDER 35 U.S.C. § 120**

- ☐ The claim for the benefit of any such applications are set forth in the attached ADDED PAGES TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR CONTINUATION-IN-PART (C-I-P) APPLICATION.

**ALL FOREIGN APPLICATION(S), IF ANY, FILED MORE THAN 12 MONTHS  
(6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION**

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NOTE: If the application filed more than 12 months from the filing date of this application is a PCT filing forming the basis for this application entering the United States as (1) the national stage, or (2) a continuation, divisional, or continuation-in-part, then also complete ADDED PAGES TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR C-I-P APPLICATION for benefit of the prior U.S. or PCT application(s) under 35 U.S.C. § 120.

**POWER OF ATTORNEY**

I hereby appoint the following practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

*(list name and registration number)*

Robert Charles Hill

Reg. No. 20 903

*(check the following item, if applicable)*

- ☐ I hereby appoint the practitioner(s) associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.
- ☐ Attached, as part of this declaration and power of attorney, is the authorization of the above-named practitioner(s) to accept and follow instructions from my representative(s).

NOTE: "Special care should be taken in continuation or divisional applications to ensure that any change of correspondence address in a prior application is reflected in the continuation or divisional application. For example, where a copy of the oath or declaration from the prior application is submitted for a continuation or divisional application filed under 37 CFR 1.53(b) and the copy of the oath or declaration from the prior application designates an old correspondence address, the Office may not recognize, in the continuation or divisional application, the change of correspondence address made during the prosecution of the prior application. Applicant is required to identify the change of correspondence address in the continuation or divisional application to ensure that communications from the Office are mailed to the current correspondence address. 37 CFR 1.63(d)(4)." § 601.03, M.P.E.P., 7th Edition.

**SEND CORRESPONDENCE TO**

**DIRECT TELEPHONE CALLS TO:**  
*(Name and telephone number)*

- ☐ Address

Robert Charles Hill  
235 Montgomery Street #821  
San Francisco, CA 94104

Robert Charles Hill  
(415) 421-2080

- ☐ Customer Number \_\_\_\_\_

*(complete the following if applicable)*

Since this filing is a ☐ continuation ☐ divisional there is attached hereto a Change of Correspondence Address so that there will be no question as to where the PTO should direct all correspondence.

## DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**SIGNATURE(S)**

**NOTE:** Carefully indicate the family (or last) name, as it should appear on the filing receipt and all other documents.

**NOTE:** Each inventor must be identified by full name, including the family name, and at least one given name without abbreviation together with any other given name or initial, and by his/her residence, post office address and country of citizenship. 37 CFR § 1.63(a)(3).

NOTE: Inventors may execute separate declarations/oaths provided each declaration/oath sets forth all the inventors. Section 1.63(a)(3) requires that a declaration/oath, *inter alia*, identify each inventor and prohibits the execution of separate declarations/oaths which each sets forth only the name of the executing inventor. 62 Fed. Reg. 53,131, 53,142, October 10, 1997,

## Full name of sole or first inventor

Neal A. Hammond  
(GIVEN NAME) (MIDDLE INITIAL OR NAME) (FAMILY (OR LAST NAME))

Inventor's signature Neal A. Hammond

Date October 10, 2001 Country of Citizenship U.S.A.

Residence 730 Ashley Avenue, Woodland, CA 95695

Post Office Address 730 Ashley Avenue  
Woodland, CA 95695

**Full name of second joint inventor, if any**

(GIVEN NAME) (MIDDLE INITIAL OR NAME) FAMILY (OR LAST NAME)

**Inventor's signature** \_\_\_\_\_

**Date** \_\_\_\_\_ **Country of Citizenship** \_\_\_\_\_

**Residence** \_\_\_\_\_

**Post Office Address** \_\_\_\_\_

**Full name of third joint inventor, if any**

\_\_\_\_\_  
 (GIVEN NAME) . (MIDDLE INITIAL OR NAME) FAMILY (OR LAST NAME)  
 Inventor's signature \_\_\_\_\_  
 Date \_\_\_\_\_ Country of Citizenship \_\_\_\_\_  
 Residence \_\_\_\_\_  
 Post Office Address \_\_\_\_\_